

LEOFF Plan 2 Retirement Board
***Member Survey**

We Want Your Input!

You can assist us in gaining valuable membership information by completing the short survey below and returning it to:

LEOFF Plan 2 Retirement Board Survey
Post Office Box 40918
Olympia, Washington 98504-0918

1. Are you a Fire Fighter or a Law Enforcement Officer?
☐ Law Enforcement Officer ☐ Fire Fighter

2. How many years have you been a Fire Fighter or a Law Enforcement Officer in Washington?
0-5 years 6-10 years 11-15 years 16 or more years
☐ ☐ ☐ ☐

3. What is your age group?
39 or younger 40 to 44 45 to 50 51 to 53 54 or older
☐ ☐ ☐ ☐ ☐

4. Have you reviewed a copy of the LEOFF Plan 2 Member Handbook, which is available from your employer or on the Department of Retirement Systems' (DRS) Web site at www.drs.wa.gov?
☐ Yes ☐ No

5. Have you provided your beneficiary information to DRS?
☐ Yes ☐ No

6. Have you requested an estimate of your pension from DRS or used the Online Retirement Benefit Estimator on the DRS Web site?
☐ Yes ☐ No

7. Have you attended a DRS Retirement Planning Seminar?
☐ Yes ☐ No

8. How familiar are you with your LEOFF Plan 2 retirement benefits? (Use a scale where 5 means you are very familiar, and 1 means you are not familiar at all.)
1 2 3 4 5
☐ ☐ ☐ ☐ ☐

** Taken from Winter 2005 Edition of Dual Response*